17008200

PTO/SB/22 (12-04)
Approved for use through 07/31/2006, OMB 0531-0331
U.S. Hasent and Tudament Office; U.S. DEPARMENT OF COMMERCE
U.S. Hasent and Tudament Office; U.S. DEPARMENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no participal are required to respond to a collection of information unless if displays a visit OMB control number.

ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fore pursuant to the Consolidated Appropriations Act, 2005 (A.R. 4816).) Application Number 10/828,780	3/4		
	3/400·5-C5		
optication Number 10/828,780	Filed April 21, 2004		
· I	11.00		
or Dermatomycosis Vaccine	- Jan Minastia	M NHa M	
rt Unit 1645		aminor Minnifield, Nita M.	
In this is a request under the provisions of 37 CFR 1.136(a) to extend the polyphication. The requested extension and fee are as follows (check time period destractions).	and for filing a reply in to the appropriation of the appropriation of the second of t	ate (ée pelum):	
Fee \$120	\$60	s	
One month (37 GFR 1.17(a)(1)) \$120	•	\$	
Two months (37 OFR 1.17(a)(2)) 9450	\$225	• 1020.UU	
Three moraliss (37 CFR 1.17(a)(3)) \$1020	\$510	3 1020.00	
Four months (97 CFR 1.17(a)(4)) \$1590	\$/95	3	
Five months (37 CFR 1.17(a)(5)) \$2180	\$1080	<u> </u>	
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this Daposit Account Number 02-2955 I have warning: Information on this form may become public. Credit eard into Provide credit card information and authorization on PTO-2035.	ay be required, or ere ave enclosed a duplic	dit any overpayment, t ate copy of this shoot.	
applicant/inventor. essignee of record of the entire interest. See 37 Statement under 37 CFR 3.73(b) is enclosed attorney or agent of record. Registration Number	d (Lown L I Chaman)		
essignee of record of the entire interest, Sec 37 Statement under 37 CFR 3.73(b) is enclosed	er_45,016		
essignee of record of the entire interest. Sec 37 Statement under 37 CFR 3.73(b) is enclosed attorney or agent of record. Registration Number	er_45,016	oril 5, 2005	
essignee of record of the entire interest. Sec 37 Statement under 97 CFR 3.73(b) is enclosed attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 Sun K. Cacheau Signoture	er_45,016	oril 5, 2005	
essignee of record of the entire interest. Sec 37 Statement under 37 CFR 3.73(b) is enclosed attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 State Conductor	45,016 April (203) 798	oril 5, 2005	
essignee of record of the entire interest. Sec 37 Statement under 37 CFR 3.73(b) is enclosed attorney or agent of record. Registration Number attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 Such Condition Signature Susan K. Pocchiari	45,016 Apr. (203) 798	oril 5, 2005 Date 3-5848 Ophone Number	

complete, including galluting, properties, and submitting the completed appreciate arm to the Gotte. This was a submitted to control the Chief Information Onto comments on the sensual of time you require to complete this form earlier suggestions for reporting this purpose, should be control to the Chief Information Onto 115. Palend and Trademark office, U.S. Department of Comments, P.O. Box 1430, Alexandria, VA 2213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Paterna, P.O. Box 1450, Alexandria, VA 22813 1459.

If you need assistance in complainty the funit, call 1-000-PTO 0100 and calcel option 2

DUPLICATE

PTO/38/22 (10:01)
Approved for use through 07/31/20U8. OMB 0801-0031

11.5. Patent and Tradoment Office; U.S. DEPARMENT OF COMMERCE

11.6. Patent and Tradoment Office; U.S. DEPARMENT OF COMMERCE

11.6. Patent and Tradoment Office; U.S. DEPARMENT OF COMMERCE

Under the paperance Restaution Act of 1995, we parsony are required to reapond in a collection of information unless if displays a valid Quas control number.

Ought no behavior	O 4 478/a)	Docket Num	ber (O ptio nal)	
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(2)		3/400-5-C6		
FY 2005 (Press personnt to the Computations Appropriations Are, 2009 (ILR. 4818).)				
		Filed April 21, 2004		
pplication Number 10/828,790				
or Demiatomycosis Vaccine		Examiner	Minnifedd.	Nita M.
nt Unit 1645		Examine the show identified		
art Unit 1645 This is a request under the provisions of 37 CFR 1.136(A) is pollection. The requested extension and too are as follows (check time	extend the pan period dashed :	and entor the	appropriate	fee below):
The requested extension and ico are \$2 to	Fee	<u>Small E</u>	nity Eco	
One month (37 CFR 1.17(a)(1))	\$120 .	\$0	20	\$
(\$450	\$2	25	S
Two months (37 CFR 1.17(a)(2))	\$10 2 0	3.5	10	s 1020.00
Three months (37 CFR 1.11 (a)(0))		\$7	95	s
Four months (3) CFR 1.11(a)(4)	\$1580	¢ 11	080	\$
Five months (37 CFR 1.17(4)(5))	\$2160	•••	0.27	
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
FOR PTO-2038 is attac	hed.			
to charge a state of the charge at the charge of the	rae fees in this	application	to a Depos	sit Account
The Director is hereby authorized to charge any 02-7955				
The Director is hereby authorized to energy any 02-2955	i po	A9 SUCIOSE	a duplicat	c copy of this sheat.
Deposit Account Number	Gredit pard info	mation shou	ld not be incl	uded on this form.
WARNING: Information on this form may Provide credit card information and authorization on PT	D-2038.			
1 Otton order				
I am the applicant/inventor.				
	terest. Ecc 3/	CFR 3.71.	uanine)	
l l Ci-iomant (milet 37 GFR 3.73	(D) IB SILMOSOC	11 00000	ינספום בא	
atterney or agent of recaud. Regis	tration Numbe	19010		
attomoy or agent under 37 CFR ' Registration number if acting under 3	1,34. 7 CFR 1.34			
Sunk Oscarian		April 5, 2005		
Signature				Date
Sugan K. Pocchiari		(203) 798-5648		
Typed or printed name			Tolop	hone Number
ilhan as kin	Linear as chair some	ere felevírendan	reguland. Extern	it multiple torms if more them
NOTE: Signatures of all the inventors or assignees of recurd of the entire signature is required, see bullow.	stratioe! of men tobs			
	mitted.			lic which is to file (and by the

This concerns of information is required by 37 CFR 1.13(a). The information is required to obtain or relate a binast by the public which is to file (and by the USPT) to process) an equired by 37 CFR 1.13(a). The information is required by 32 U.S.C. 122 and 27 CFR 1.11 and 1.14. This collection is certificated to take 6 minutes to use from the USPTO. Time will vary depending upon the individual case. Any compaties, including self-lefting, preporting, and cubmitting the counted to form to the USPTO. Time will vary depending upon the individual case. Any compatition the entering the process of the entering the process of the compatition of the collection of the object of the compatition of the collection of

If you need assistance in complaining the form, cell 1-hop-PTO-9199 and solvet option 2.

tinnes the paperwork Reduction are of 1995, to persons are requ	(190 to 194) and to to 4	Dockиi Number (Optio	nal)	
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.138(a)		9/400-5-C5		
FY 2005 (Feet pursuant to the Genecidated Appropriations Act. 2003 (H.R. 1818).)		. # 04 0004		
Optication Number 10/828,790		Filed April 21, 2004		
or Dermatomycosis Vaccine	<u> </u>	Examiner Minnifin	old Nita M.	
ri Unit 1645				
of Unit 1645 his is a request under the provisions of 37 CFR 1.13(pplication. he requested extension and fee are as follows (check	k time period desired t	and enter the appropri Small Entity Fee \$60	ate fee bclow):	
One month (37 CFR 1.17(s)(1))	•	\$225	\$	
Two months (37 CFR 1.17(a)(2))	.\$450	\$510	s 1020.00	
Three months (37 CFR 1.17(a)(3))	\$1020	\$795	5	
Four months (37 CFR 1.17(a)(4))	\$1690	\$1080	s	
Five months (37 CFR 1.17(a)(5))	\$2160	2 100D		
Applicant claims small entity status. See 37 CFR	1.27.			
A check in the amount of the fee is enclosed	J		•	
Payment by credit card. Form PTO-2038 Is	attached.			
The Director has almody been suthorized to	charge fees in this	application to a Det	oosit Account.	
The Director is hereby authorized to charge Deposit Account Number WARNING: Intermedian on this form may become WARNING: Intermedian on this form may become	any foos which ma	y be required, or cro re enclosed a duplic	dit any overpayment ate copy of this shee	
WARNING: Information on this form may second provide credit eard information and authorization	on PTO 2034.	•		
1 am the applicant/Inventor.			•	
assignee of record of the ent Statement under 37 CFR	3,73(b) (5 enclosed	(FOILIT F. LOVODISO).	•	
attorney or agent of record. F		49,010		
attorney or agent under 37 C Registration number if acting un	FR 1.34. ider 37 CFR 1.34			
Sunk. Pochiai	<u></u>	April 5, 2005		
Signature		(203) 798-5648		
Susan K. Pocchiari Typed or printed name		Telephone Number		
NOTE: Signatures of all the inventors or assignants of second of the	endies interest of bioli ropro	Benjative(s) ere mquired. Su	brait multiple forms if more th	
A DOWN OF THE RESIDENCE OF BOSINGS AND LOCATED OF INK				

Explaints appearing asymmetric properties in complete this form analysis suggestions for reducing this burden, should be writ to the Chief Information Office upwinents on the amount of time you require in complete this form analysis and suggestions for reducing this burden, should be write to the Chief Information Office U.S. Prepartment of Commissioner to Sect 1450, Alexandria, VA 22313-1450. DO NOT SEND TO: Commissioner for Palants, P.O. Box 1460, Alexandria, VA 22313-1450.

If you name assistance in completing the form, call 1-800-PTT-4199 and select upther 2.